



~~NV. 3.12.~~

WG. 6

7641. 'Professional notes among the Indian Tribes about Gt. Slave Lake, N.W.T., by Egerton Y. Davis, M.D., late U.S. Army Surgeon'; 1882.

Obstetrical! In Osler's handwriting throughout. The last leaf is endorsed: 'Prepared as a joke on Molson [the new editor] and partially printed for the C.M. & S. Journal, May 1882.' Suppressed. See note to no. 7114.

This MS. is preceded by a later one (3 leaves) purporting to give the *true* story of 'Egerton Yorrick Davis'. It mentions his writings (including the unsuppressed letter to the Medical News, Phila., 13 Dec., 1884), his death in Lachine Rapids, and his collections at the Guildhall, Caughnawaga!

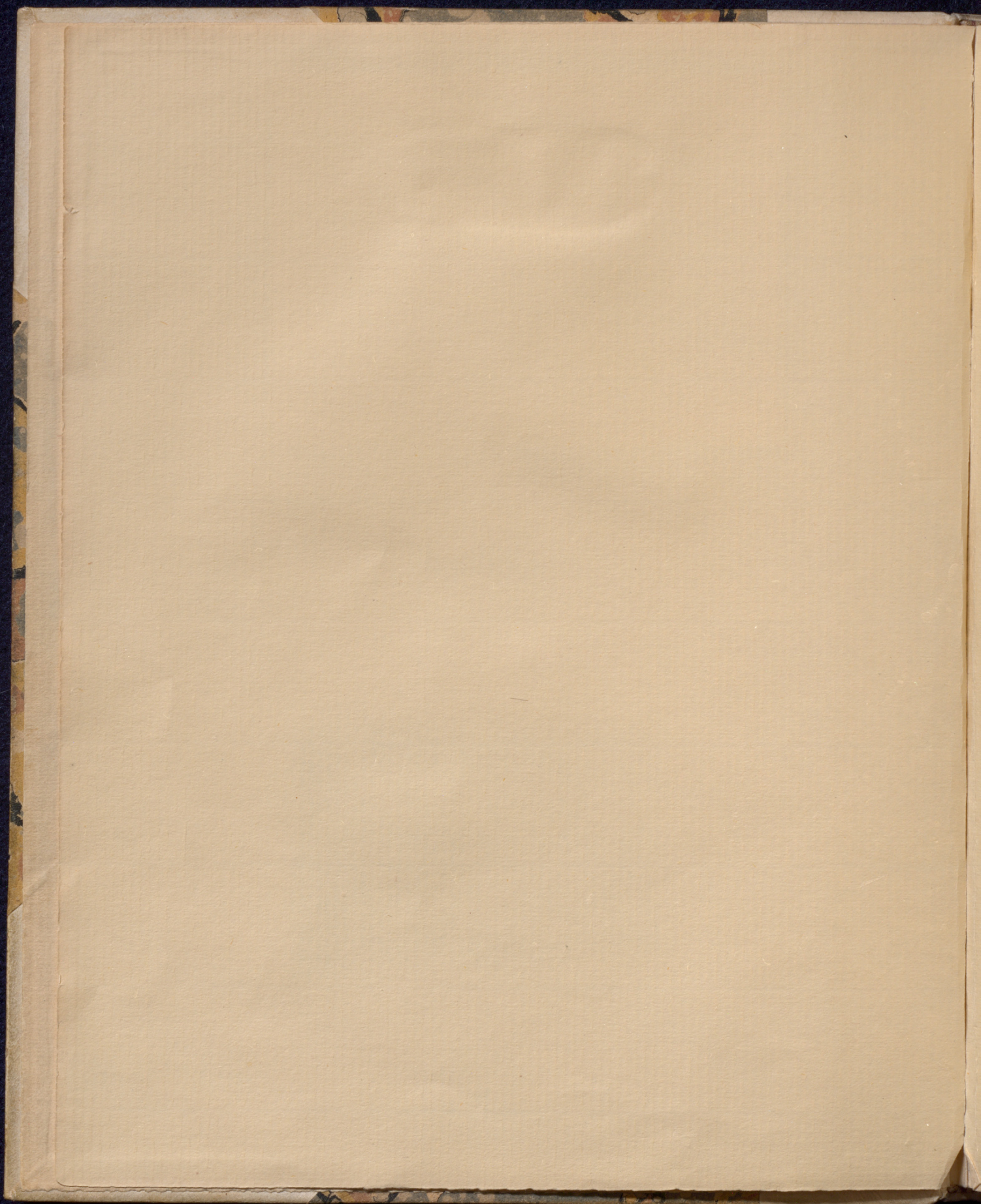
7641

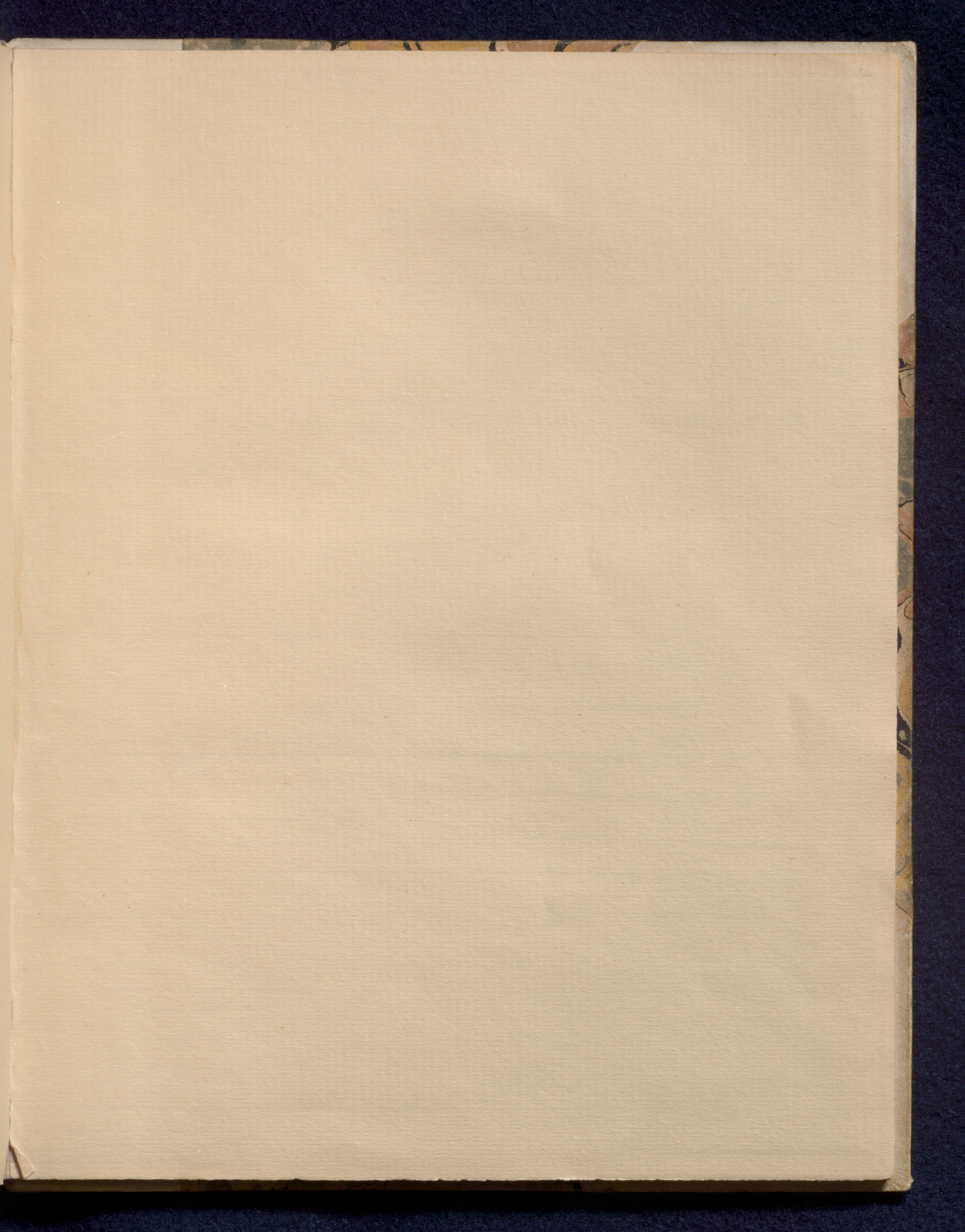
FROM
THE LIBRARY
OF
SIR WILLIAM OSLER, BART.
OXFORD

In Riesman's "History of the Interurban Club", 1937, p. 250, T. McCrae, in his fine appreciation of Osler, says of this account of E.Y.D. (on leaves 4, 6 & 8 here), "I found it after his (O.'s) death and Cushing has quoted it in the biography, vol. 1, p. 240." I think McCrae must have been mistaken. From Osler's note on the back of leaf 2, referring to the account on those same leaves, it is evident that they, like the rest of the volume, were put here, or meant to be put here, by Osler.

W.W.F. 1938.

The inspiration was probably Engelmann's "Labor among primitive people", 1883.





* For an excellent variation of this story, containing
all the essentials but the truth, see no. 7114 "The
relation of medical literature to the personal esteem" by
Dr Bayard Holmes.
no.

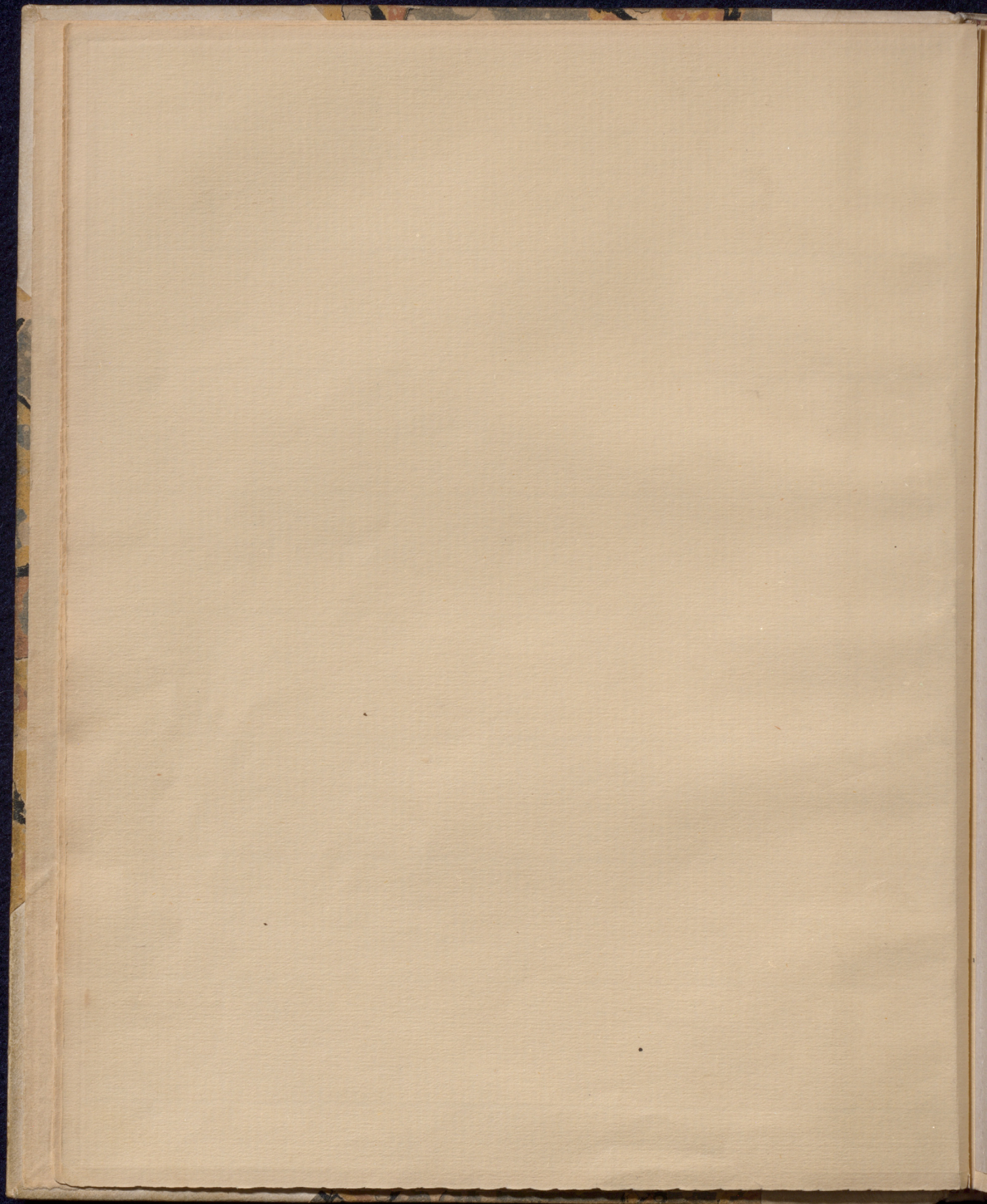
Copied below, at leaf 27.

4

ms of
Egerton Gortick Davis md. Late U.S. army
of
Caughnawunga P.2.

I never could understand about Egerton G. Davis. He is reputed to have practiced at Caughnawunga, nearly opposite to Montreal, where his collections were stored in the Guildhall. Some have said that he was a drunken old reprobate, but, the only occasion on which I met him he seemed a peaceful old rascal. One thing is certain he was drowned in the Lachine rapids in 1884, & the body was never recovered. He had a very varied life - in the U.S. army, in the north west, among the Indians, & as a general practitioner in the north of London. I knew his son well - a nice mild mannered fellow, devoted to his father.

These notes of customs among the Indian Tribes of the Great Slave Lake were sent to + Dr. Wilson, just after he had taken over the Montreal Med. Journal with Dr. Ross. One day I was in the, R - room of the Gazette office where the J. was printed & Connolly said "Oh there is an awful article for



2

the Journal this month - Peter is in despair about it (P. was the compositor) and says Dr Ross will never print it. I went over & found these sheets - all set up. I told Conolly that Davis had not a very good reputation & to hold the printing until Dr Ross saw the article. Of course he saw at once that it was not fit to print.

I heard nothing more of Davis until I went to Philadelphia. I was on the staff of the Medical News, and Parvin, in 1884 + 1885, was very interested in the action of the perineal muscles, & in an ^{Editorial} article discussed the question of the constructor cunni, & the possibility of the old idea of a penis captivus. One day I met Minis Hays, the Editor, who said "By the way do you know Egerton G. Davis, who lives somewhere near Montreal. Parvin is delighted, as he has sent the report of case of penis captivus, just such as he thought possible.", I said "Hays, for heavens sake! do not print anything from that man Davis. I know he is ~~not~~ a reputable character. Ross & Roddick know him well." "Too late now" Hays said "the journal is printed. Off." So the letter appeared

For a very good variation of the Egerton G. Davis
story see Bayard Holmes. no p. 8.

"The case has come into the literature"

— e.g. Hühner, Max: "Disorders of
the sexual functions," 2nd ed., Phila.,
F. A. Davis Co. [Not E. Y. D.!]¹⁹¹⁷⁺¹⁹²¹, 1923, p. 184,
where it is quoted from KIRSCH: "Sexual
life of women," N. Y., Rebman, (1910),
p. 340. In both places it is briefly paraphrased
& attributed to "Davis," with out specific reference.
Med. Lib. { Hühner 616.8341 / H 887
 { Kirsch 612.6 / K 61.Ep

in the number

for Dec 13,

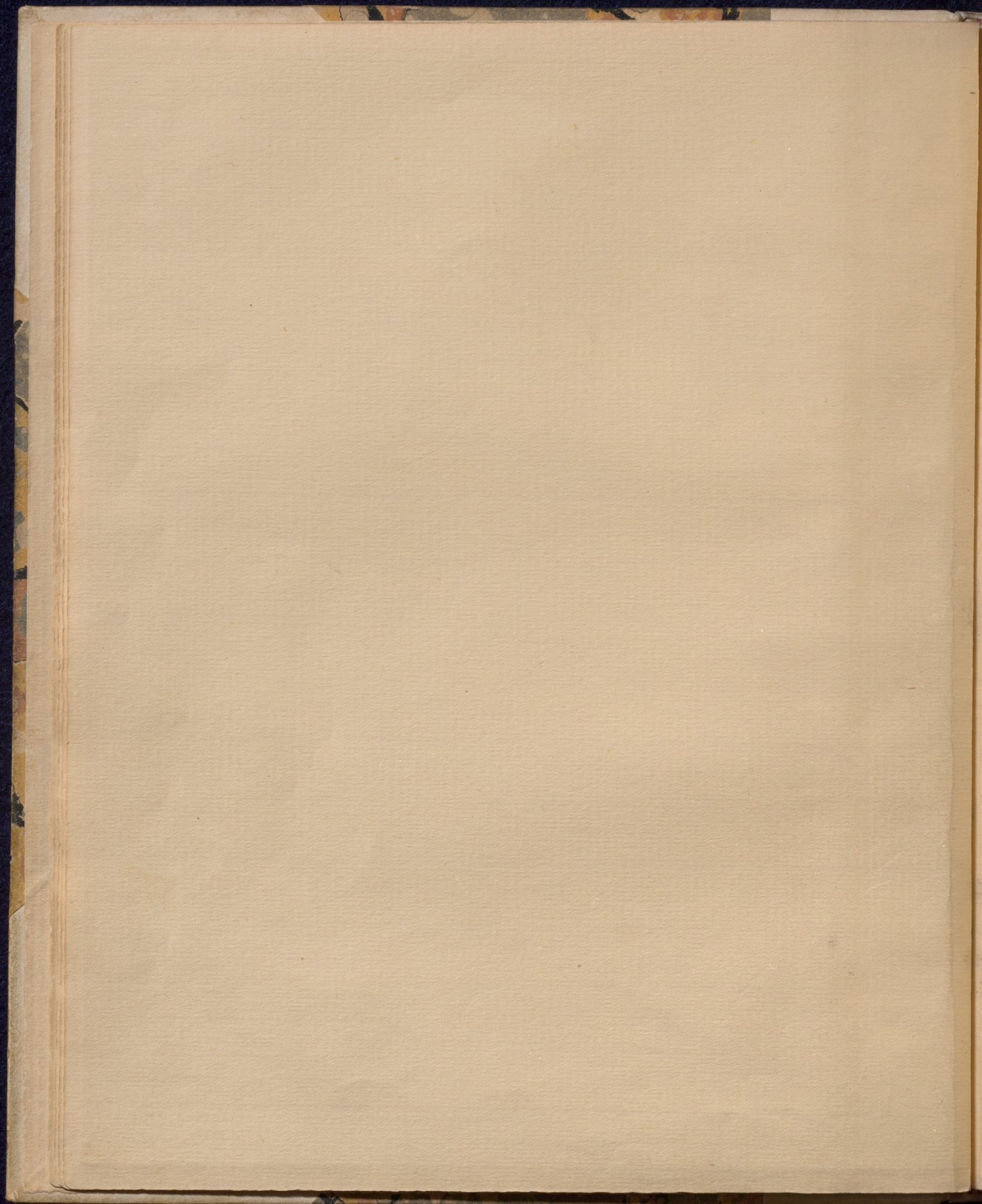
1884

It is dated from

Cathlamet
14 Dec. 1884.

The case has gone into literature, & is often quoted. Miss Hays was disgusted, & Ross insisted that Davis was a joke, and he & Roddick ~~insisted~~ ^{hinted} that I, ~~of~~ all people! was the only one who knew anything about him. Some went so far as to say that I was Davis, & the rumour got about in Philadelphia. I never but once met the man. Afterwards I often used his name when I did not wish to be known. I ~~then~~ ^{would} sign my name in the Hotel Registers as E. J. D. Canby-nawanga. Once, at Atlantic City, after I had had bronchopneumonia, I registered under that name, immediately after Mrs Oler & Revere. I had been there a week when a man came up & said "Are you Mr Oler? I have been looking for you for a week, your secretary said you were away & not to be got at. My son is ill here & I wished you to see him." He had said to Cadwallader Biddle. Who is that fellow, Davis, all the time with Mrs Oler?, and was furious when he found that I had registered under that name. They tell in Montreal many tales about Davis, & father many of them on me. I am always sorry that I did not see more of him, ^{that} & I never visited his collections at the Guild Hall Canby-nawanga.

William Oler

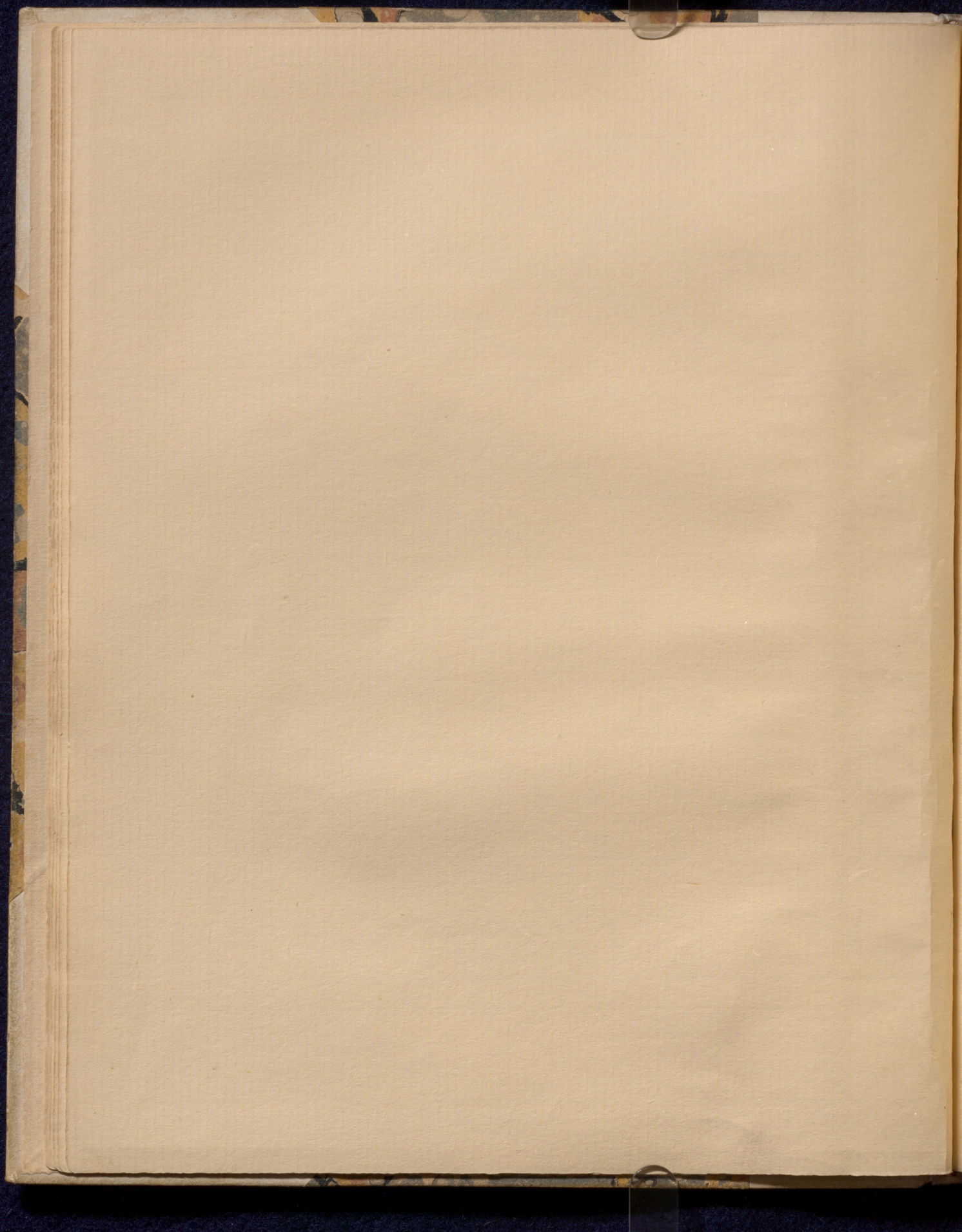


Professional notes regarding the
Indian Tribes of the E. Star Lake. N.W.T.

Egerton Y. Davis M.D. Late U.S.
Army Surgeon.

The following notes may be of interest to
many ^{of your} readers. ^{I have} though heavy
as much upon social as upon medical
subjects. They are the outcome of many
years intercourse among the natives
in the above mentioned localities.

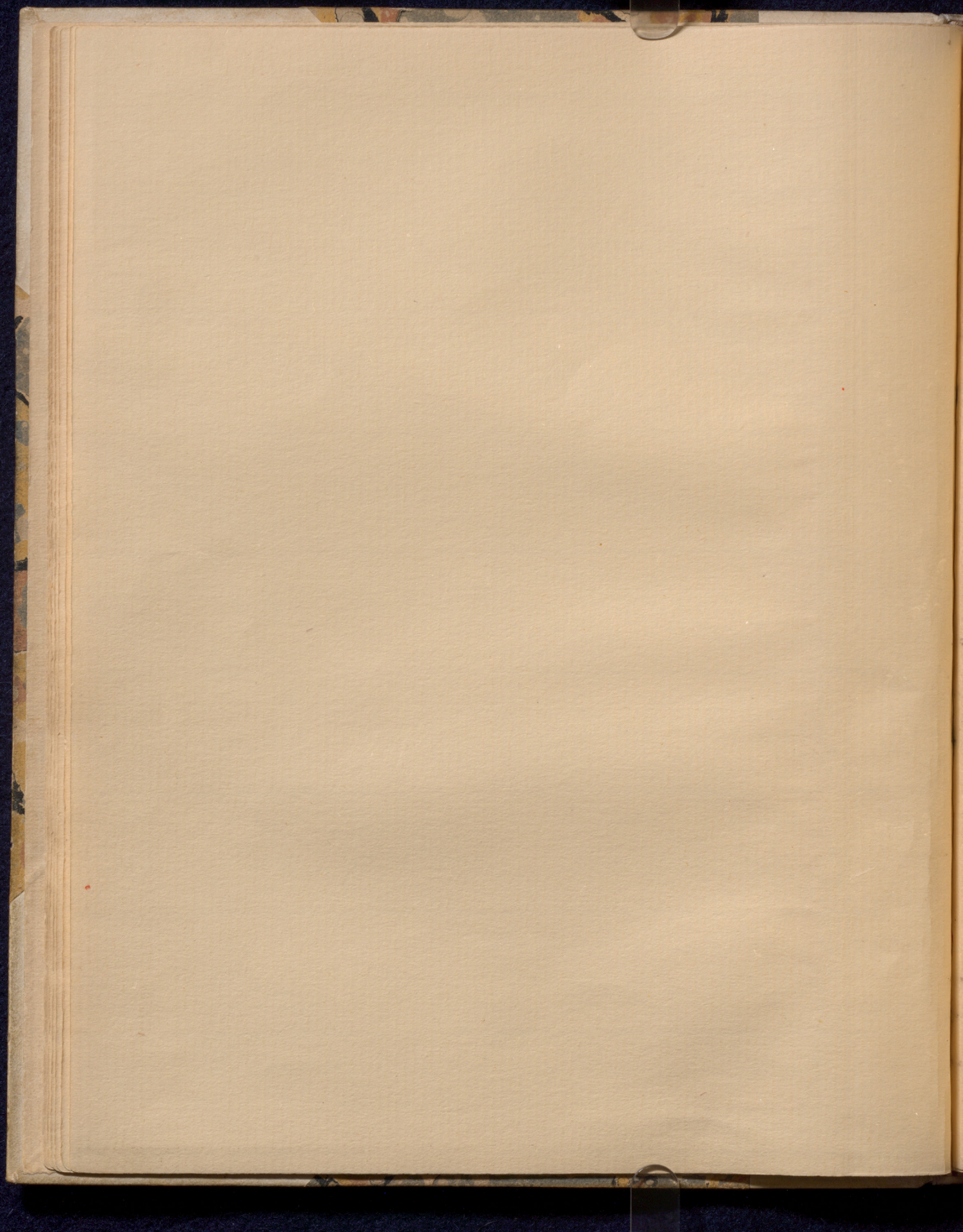
Odd. ritual rite. Though circumcision is not
employed, yet, as it so often there are in
the ^{uncivilized} ~~tribes~~ communities there is a peculiar
ceremonial connected with the
male genital organs. When a young
man contemplates marriage, he
communicates with the chief who calls



2

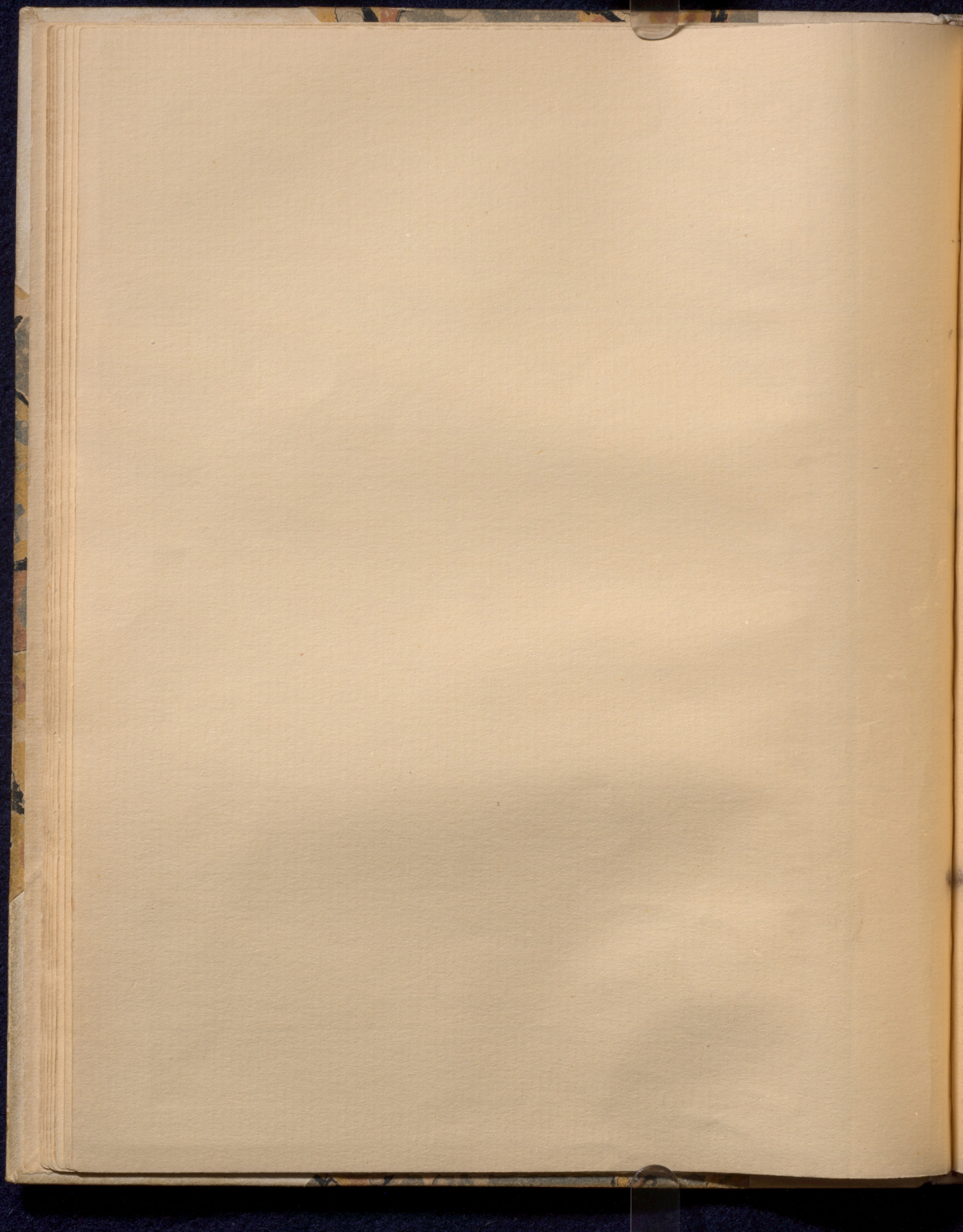
12

a meeting of the principal
warriors and a pow-wow is held
and an inspection is made of the
candidate. ^{tree of life} ~~tree of life~~ ^{of a proper person to propagate the}
It reminds one of the
~~so-called~~ jury of matrons summoned
to decide upon the case of some poor
woman. It is one of the most
ludicrous things which I ever witness-
ed to see the dignified & more grave
& dignified Indians inspecting the
penis of the unhappy young man. I
believe me it is no formal matter.
They give it a thorough overhauling
and if the slightest defect is observed
his candidature is peremptory re-
fused. I saw one rejected on account
of a very narrow preputial orifice.
The curious part is to come, if the exami-
nation is satisfactory he is handed
over to a sort of committee of 12
squaws, six mothers & six virgins
who proceed to burn with a heated



iron two cross lines on the head of
the penis, just upon the upper surface
of the glans. Usually this is done lightly
& causes a simple superficial burn
but I remember ^{on} ^{occasionally} one old bag ~~with~~
with a red hot needle made a job
for me, as the young have got the
most violent inflammation & the
head of the penis nearly clung away.
& the marriage bed be put off.
I cannot find any account of the
origin of this rite. The union is consum-
mated while the penis is still sore
& it may be that it was done originally
to prevent over frequent & violent
coitus during the early weeks of the
red-man's honey-moon.

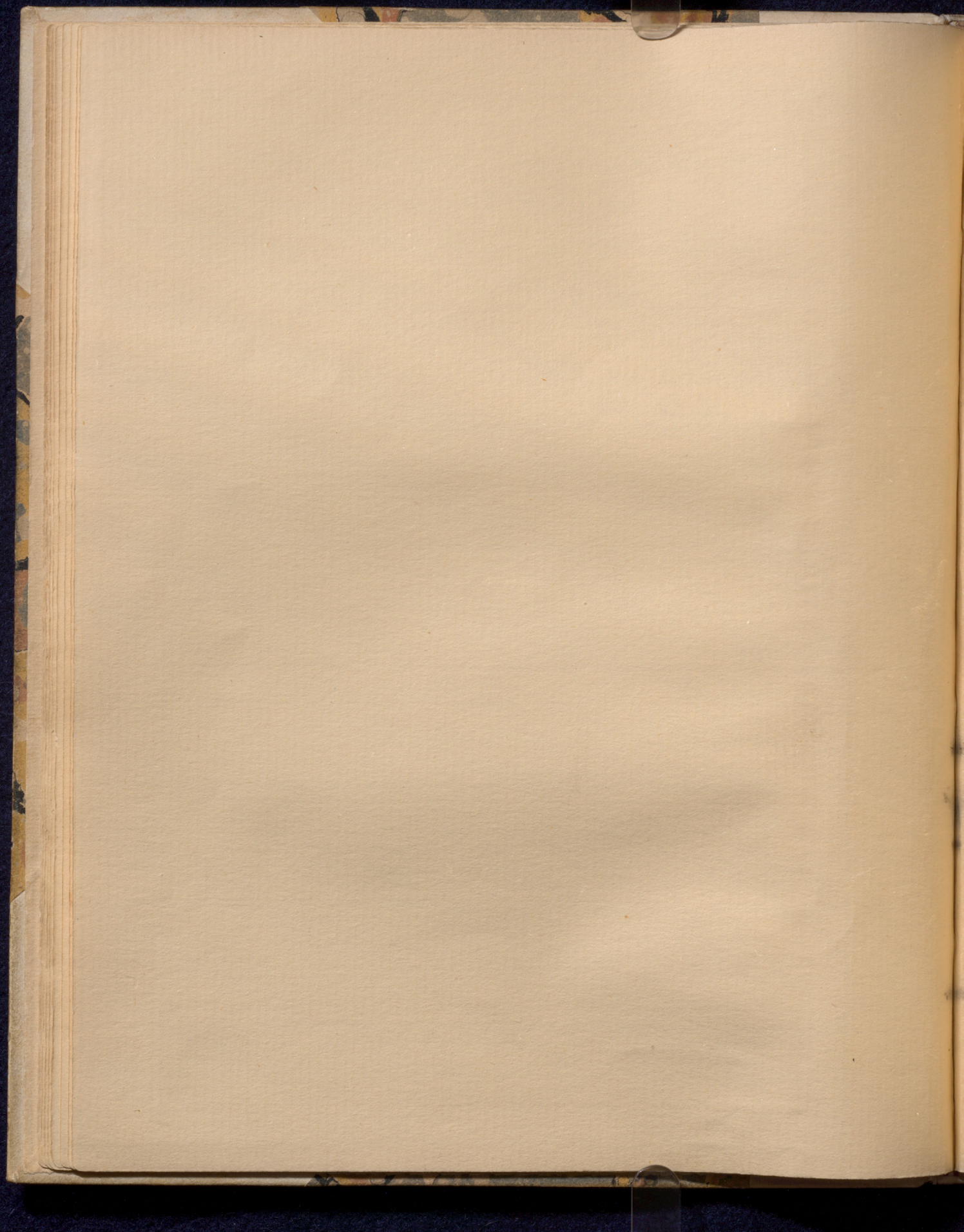
(2) That there is no new thing under the
sun we have the very best authority
for believing & if the best books of Solomon
should ever come to light who know
but what there might be a volume
of ^{Israëlitish} ^{gynæcology} ~~semblance~~ ^{gynæcology} among them



16

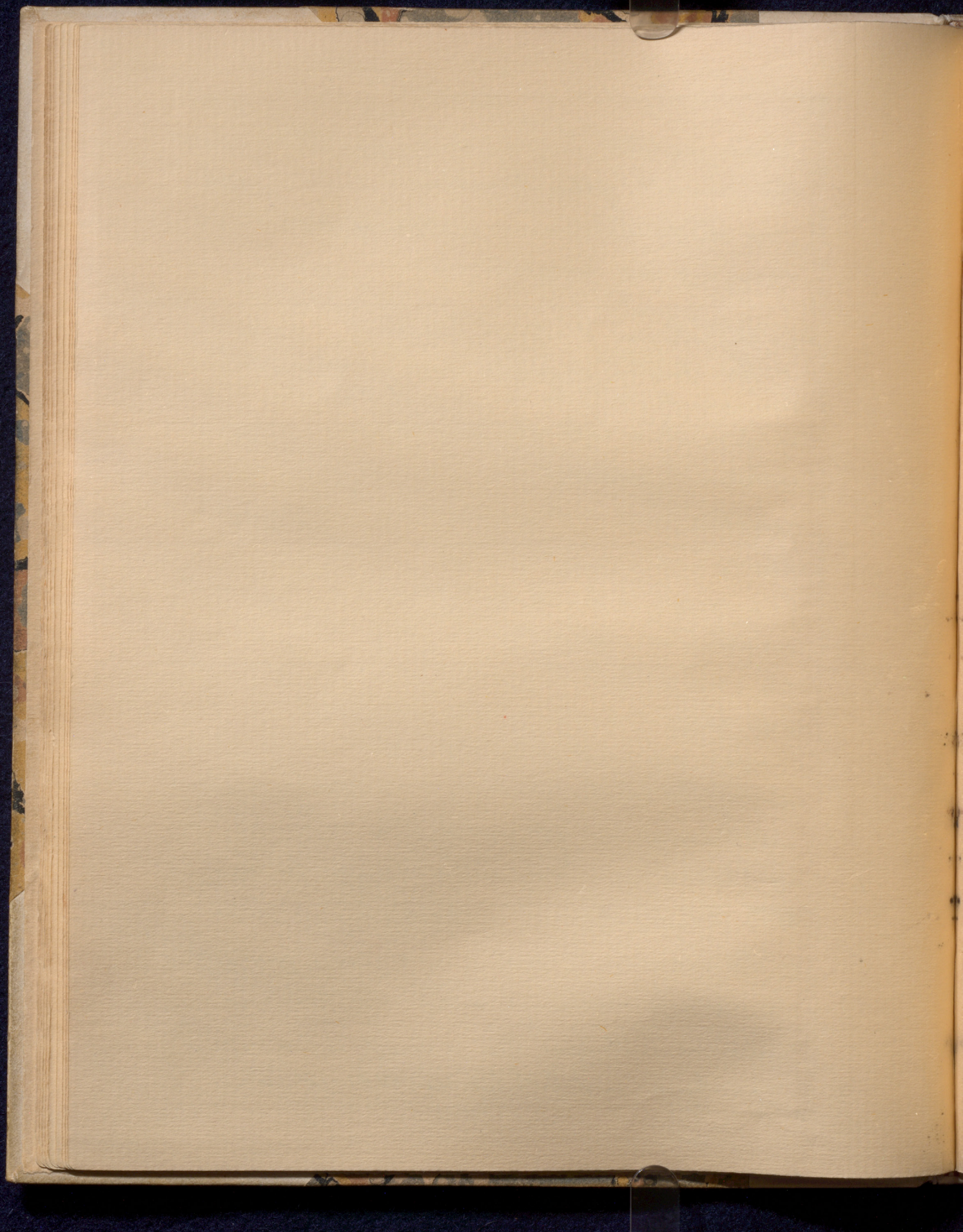
4

However that may may be there can
 be no doubt that ~~certain~~^{certain} knowledge
 of certain things which ^{was} ages ago ac-
 quired & then perhaps lost in many
 branches of the race, ~~many~~ has been
 retained in other communities. An
 illustration of this is afforded by the so
 called Genu-pectoral position in copu-
 lation. I do not remember who introduced
 this in modern practice as a gynecological
 procedure but it will surprise many to hear
 that it is habitually practiced in cases
 of sterility among the Indians of this
 district. It amounts almost to a tribal
 regulation that if after the lapse of
 so many months there is no change
 in the profile view of the young spouse
 the genu-pectoral position must be
 adopted & the chief takes means
 to see that it is done. I have known
 it perfectly successful in several
 instances. A medical friend who has

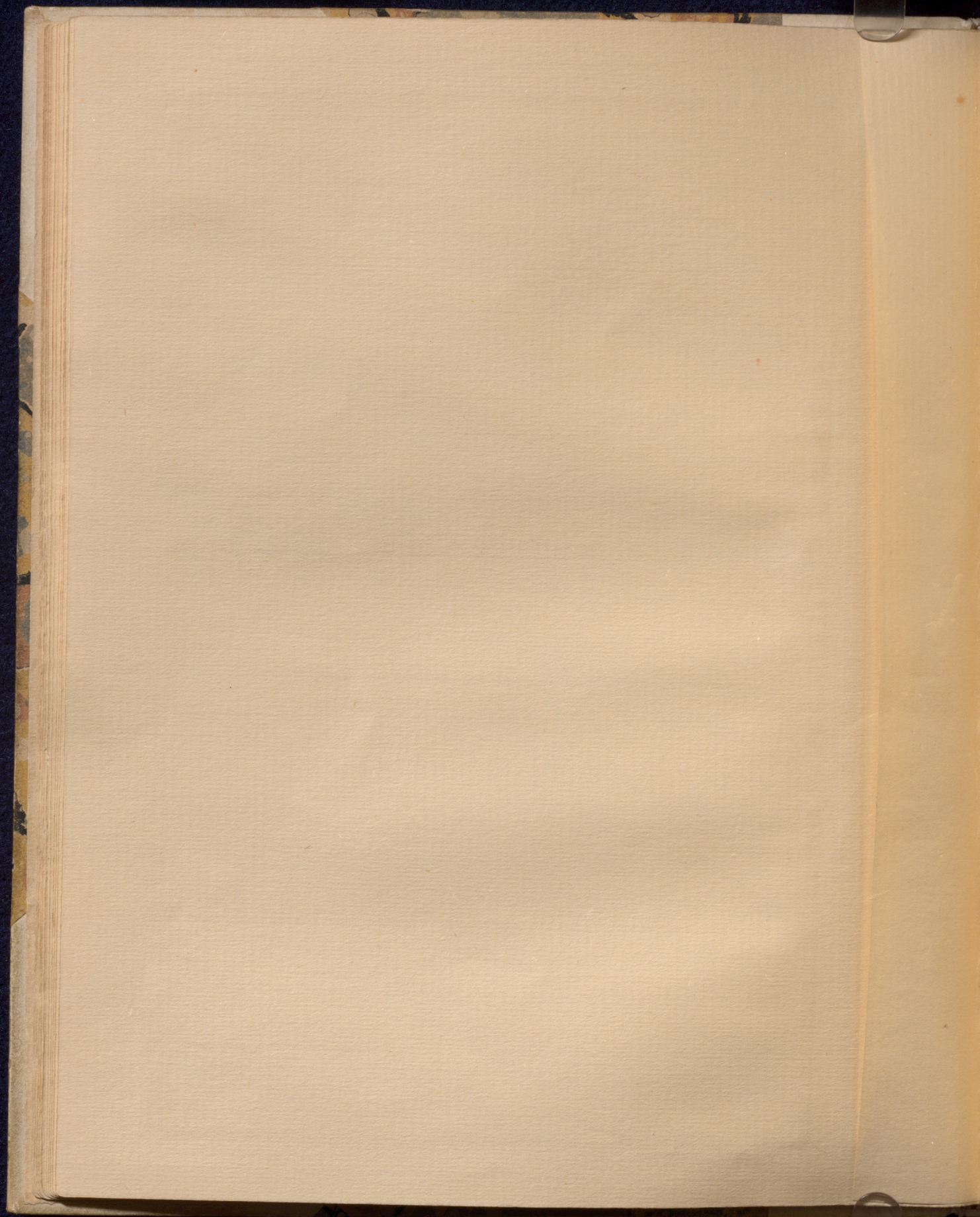


been in the higher regions toward the mouth of the Mackenzie River tell me that the same practice prevails among the Esquimaux.

(3) The Indian Obstetric position. ~~As has been~~ is the ^{proper} position for a woman to be delivered in. In civilized communities the dorsal or lateral position is almost invariably ~~followed~~ assumed, but the practice is most varied in different races. In passing through St Louis a few years ago I had the pleasure of a consultation on this subject with Dr Engelman who had collected a great deal of information of the subject & was preparing to publish a paper upon it. In the tribe which I know most of, the whole proceeding is accompanied with unusual formality. The order ^{when in camp} as far as I could ascertain is as follows. The squaw tells the husband - who displays a stercor on the occasion which I have ^{never} seen imitated by a white husband. - that the time is up, and he notifies the chief, who is in reality a sort of Obstetric referee, & he

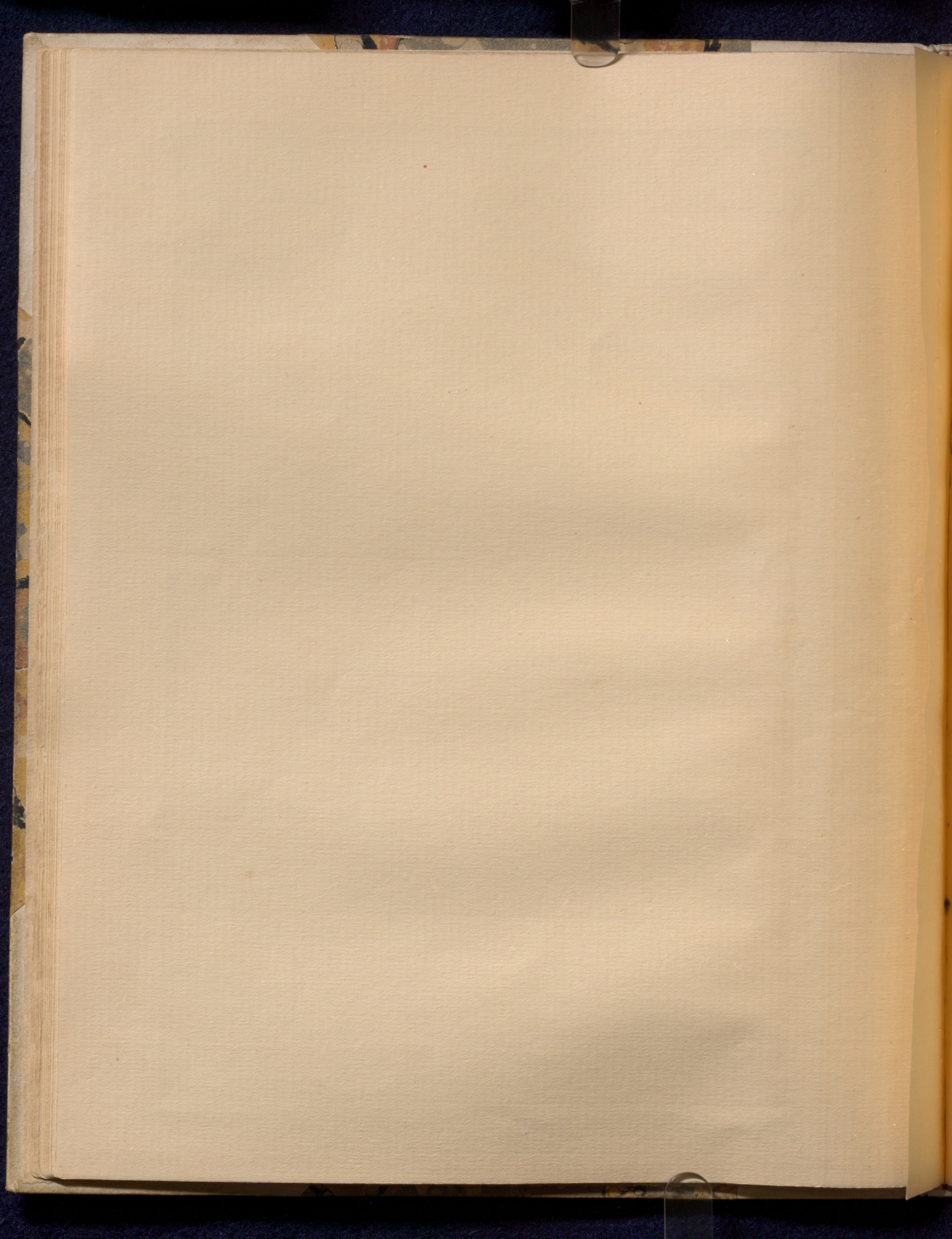


picks out from eight or ten of the ²⁰older
 Squaws, one to superintend the operation.
 When in camp there is a special inguam
 set apart & can only be used for this. - It is
 in fact a sort of primitive lying-in Hospital.
 In the middle of this is a sort of triangle
 made of two poles strapped together & from
 the angle two loops drop to a distance
 of about four feet from the ground. The
 affair may be witnessed by 10 male & female
 friends who assist in turn, but the old
 woman sent by the chief is the responsible
 party. I was particularly anxious to witness
 a native accomplishment but for a long time
 could not prevail on the chief to allow me to
 be present. Last year, however, I saved
 the life of his youngest & favorite Squaw
 who had desperate ^{attack of} pneumonia & he
 vowed that he would give me anything
 I asked. In a few days, I requested
 to see an Indian confinement.
 He reluctantly consented & the visit
 I saw. In the inguam above described

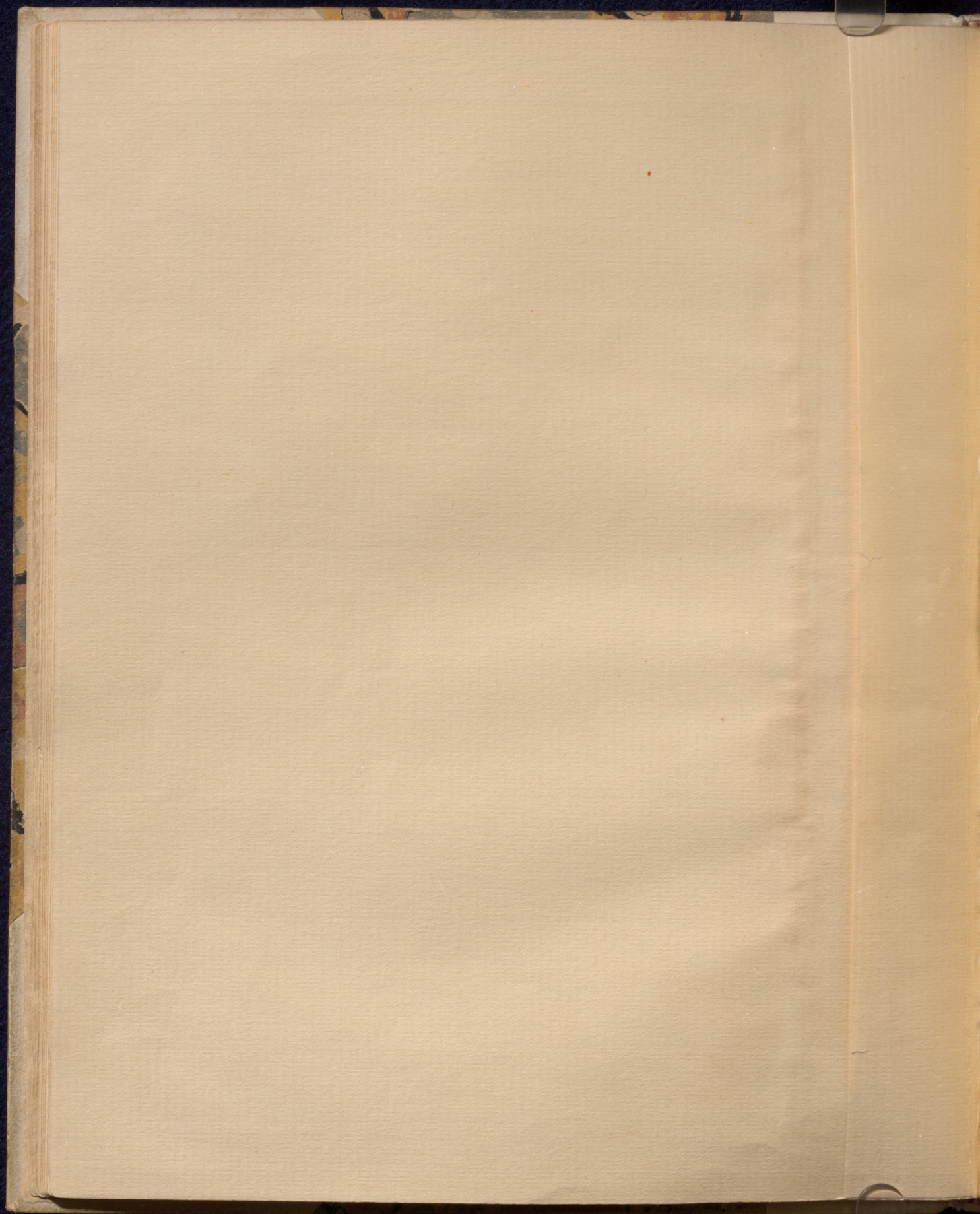


were 9 Indians, 4 men & 5 women ²²
 including the old one who had charge
 of the case. I was particularly anxious
 to know whether any manual interference
 was used or whether everything was
 left to nature. Judge of my surprise when
 the patient on the husband's knee, the old
 midwife proceeded deliberately to make
 a digital examination, secundum artem.
 The solemnity of the whole proceeding ~~was~~
~~almost too much for me~~ & the impassive
 faces of the spectators, the expression
 on the old woman's face (just such as
 I have seen in many a man when
 making a similar examination.
 a sort of expression as if the eyes were not
 on his ~~face~~ ^{head} but on the ends of the fingers
 groping about in the vaginal darkness.)
 & the groans of the woman, coming in with
 each pain. ^{were also to be seen} So soon as the old woman
 had finished, every one present, in order of
seniority - also made an examination. &
 this appears to be the rule. though I pitied the
 poor patient during it. When the head is
 well down & the pains forcible the woman
 is lifted into the loops which hang from
 the triangle & is suspended by her arm-
 pits the feet about 2 feet from the ground
 & she is supported on either side by friends.

almost too
 much for me



7
 Everything now is directed to ⁸pre-²⁴venting the patient touching the earth; if this most unfortunate calamity should happen the child is certain to be perished, and to have no courage. and I was told of many instances in support of this. Lying in this triangle, stark naked, the poor creature gives birth to the child, were it not that ~~it~~ should take too long I could speak upon the advantage of studying by this method the rotation of the head. but I may say that this opportunity threw a flood of light upon the question & I never before understood the precise way - now is it given correctly in the books. The child is received by the father; the cord is tied with a string and bitten through. The woman is suspended until the after birth comes away; & if it is slow the cord is tugged at & in the case I saw was broken by the hard pull of a big brave.



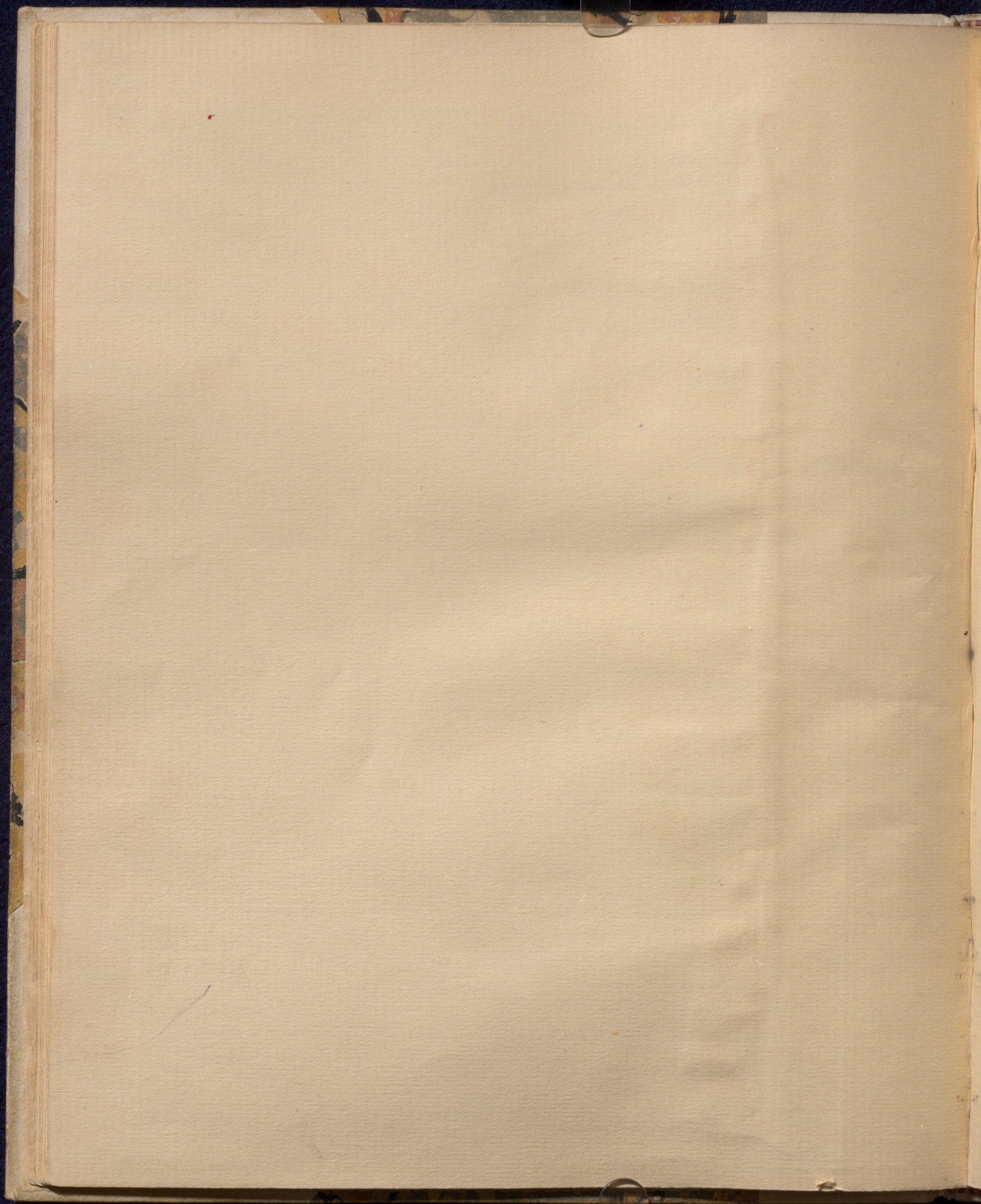
26

8 (14) A vile custom. Almost every primitive tribe retains some vile animal habit not yet eliminated in the upward march of the race. The most disgusting one of which I have ever heard is practiced by the natives in this region and has a direct connection with the preceding. The greatest delicacy of the Indian cuisine is baked placenta horrible to relate! Even before the delivery preparations are made - the soft of ven is ~~made~~^{ready} ready & the organ fresh & ~~is~~ ^{is} ~~put~~ ^{is} put in, & the cord cut into small sections, is placed round it. When baked it has shrunk to ~~half~~ the natural size. The braves alone eat it and they believe it to be the source of strength & courage. They have a notion that it is the thing which makes the child and think that if they eat it it will ~~do~~ ^{do} them much good.

I have some other details but fear to trespass too much on your space

Prepared as a
note on Molsen
+ partially printed
for C M & S Journal
May 1882

as
of
m
m
882



From Bayard Holmes, "Relation of medical literature to professional esteem", Lancet-Clinic, Cincinnati, 1915, 114:114-15 (# 7114, reprint, pp. 8-9); with ref. to W.O.'s note on leaf 2 verso ("all the essentials but the truth"):

"It matters very little to too many physicians what the thesis of an article is, they make it the opportunity to tell the same old story of personal experience. It is related of Sir William Osler that while yet a young man he was secretary to the most dignified medical society in Montreal, and he felt deeply this tendency of some of its members to outdo any thesis with exaggerated personal experiences of their own, and he set about one of his characteristic tricks to discover the sham. In reading his correspondence to the society, at a certain meeting, there appeared an application from Dr. Egerton Y. Davis, late assistant surgeon in the United States Army, now located in the Indian Reservation opposite Montreal, with a thesis entitled, "Some Peculiar Observations in Obstetrics Among the Caughnawaga Indians." An evening was set for the reading of the paper. The learned society convened and awaited the belated candidate. When all patience was about exhausted, a breathless messenger dismounted at the academy's door and announced the inconceivable absence of Dr. Davis, who was attending the confinement of the squaw of the Indian chief. By order of the waiting society the secretary was ordered to read the thesis, which he did remarkably well considering the novelty of the subject and the idiosyncracies of the chirography. It is needless to say that some previously anomalous incidents were related of the accouchement of these Caughnawaga squaws that had never been recorded of any civilized or savage people. After the thesis had been read, Dr. Osler sank into his seat and buried himself, after the manner of secretaries, in his many papers. A moment of silence followed when the biggest bluffer of them all rose meditatively and expressed satisfaction that the admirable thesis gave him an opportunity and so forth and so forth. Then another and another followed until the Munchausen-like thesis fell back from an astounding novelty to an almost forgotten commonplace. The essayist was unanimously elected to membership and the thesis and discussion ordered printed in the Medical News, of Philadelphia.

During the following week, the spirit moved several of the disputants to visit the reservation to call upon the remarkable essayist, Dr. Egerton Y. Davis, late assistant surgeon in the United States Army, but no such person was known to the commandant at the fort, or at the reservation store. Considering the pre-automobile and pre-telephone days, alarm spread quickly. The secretary was urged to stop the publication of the fraudulent thesis, but the embryo Sir William Osler informed his frantic colleagues that proof of the article and the discussion had already been corrected and returned to the publisher. The die was cast. The hoax was off. Since that mournful night modesty has prevailed at this provincial medical society."

These photographs,
from the 'Medical
News', Phila., vol.
45, 1884, were
sent by Dr. Malloch
in 1929, after the
Catalogue was
printed.

The editorial
'An uncommon
form of Vaginismus'
(pp. 602-3) attached
to this leaf & the
next, was by
Theophilus Parvin,
and drew from
E.Y.D.'s fertile
imagination and
ready pen the
letter (p. 673)
inserted below
at leaf 29.

W. W. F.

the proof is
scientific accu-
of certain
of dissemi-
knowing
eases, and
of readily
re, and of
reatment,
consumer,
at all in-
that this
guarded

agus—the
e rise to
is. Milk
nation of
phthæ on
kness, at
supposed
which fed

to show
foot and
it similar
clear how
poison of
ne other
did fever
pidemics
ontamin-
ilk. In
case of
non ex-
as been
aggested
warm, as

Other
do not
hich, in
deemed
of trans-

ficer of
ilk epi-
cautions
ese out-
divided
orities.
of boil-
is prac-
at "to
said to
it."

of the
ie strict

control of the sanitary authorities, which should be clothed with power to make proper regulations and to enforce them by the aid of efficient inspection. The organization of such a service would at first be arduous, but so soon as its requirements are made known and intelligently comprehended, a willing co-operation might be expected in most cases. There is a prevailing ignorance of the facts above stated, which is damaging to the best interests of the public health and ought to be removed. In no way can this be better accomplished than by the organization of an authoritative service regulating the purveying and sale of this important article of food.

AN UNCOMMON FORM OF VAGINISMUS.

THE word *cunus*, signifying the female pudendum, was said to have been used by "the more lascivious poets," and was condemned by Cicero, in one of his orations, as an obscene word. Though Horace does not deserve to be placed in this class, yet he made use of the word: *Fuit ante Helenum cunus teterrima belli causa*. Nevertheless, it has a classic derivation, probably coming from *κύνειν*—to be pregnant—and for many years had a place in anatomy; indeed, up to the present some writers speak of the constrictor *cunni* muscle, but most now designate the muscular structure which contracts the vaginal entrance as the bulbo-cavernosi muscles; these are the vaginal sphincter.

The late DR. SIMS, in a paper communicated to the London Obstetrical Society by Dr. Tyler Smith in 1861, stated that, by the term *vaginismus*, he proposed to designate "an involuntary, spasmodic closure of the mouth of the vagina, attended by such excessive supersensitiveness as to form a complete barrier to coition." Dr. Sims did not describe a new disease—indeed, he disclaimed any such attempt. Dr. Louis Debrand, who has recently published an important monograph, *Des Rétrécissements du Conduit Vulvo-Vaginal*, states that Huguier, in 1834, was the first to describe spasmodic contraction of the vaginal sphincter. Nevertheless, though Dr. Sims only recalled attention to a disorder which others had observed, he gave it a name so suitable that it at once received general acceptance, and is sure to keep its place in medical nomenclature.

But while the name was received with such favor, its definition as given by Dr. Sims was soon found to be too narrow. For example, in a case of *vaginismus* recently under our observation (the subject had been married several months, and coition had been impossible) there was very great suffering, especially marked at the monthly periods, in the anal sphincter, violent cramp of this muscle, accompanied with painful and difficult defecation, although there was no local disease to be discovered here, and the

affection was cured by the treatment of the vaginismus, using this word as previously defined.

HILDEBRANDT, who has written, in Billroth's *Handbuch der Frauenkrankheiten*, probably the best article upon vaginismus to be found, remarks: "Most frequently the constrictor cunni is the seat of this cramp. From the anatomical position of this muscle the necessarily following results are the impossibility of coitus, the application of a speculum, even the introduction of the exploring finger." He then adds that, in the further progress of the disease, there occurs cramp of the anal sphincter, in which the patient has a sensation of swelling, rigid enlargement, tension, spasmodic jerking, and difficult and painful defecation. He describes this spasm as extending to other muscles, or to groups of muscles, forming the pelvic floor; in rare cases all the muscles are affected. He states that cramp of the levator ani may cause contraction of the upper part of the vagina, so that a speculum, or a swollen glans penis, as in coition, may be forcibly retained.

The form of vaginismus last mentioned has recently been considered again by HENRICHSEN in the *Archiv für Gynäkologie*. The author refers to the observations of Scanzoni, and those of Hildebrandt, in which the penis was retained captive by woman's genital organs, after coitus, by a phenomenon analogous to that observed in certain animals, especially the dog. He states that, while Scanzoni thought this phenomenon due to the constrictor of the vagina, Hildebrandt attributes it to the levator ani, for the constrictor of the vagina would oppose the intromission of the penis, and it is not at all probable that spasm of the latter muscle could retain the member already introduced, especially a part of it which is smaller than the glans.

Debrand, *op. cit.*, quotes from Révillout a case in which the contraction was about two inches from the vaginal entrance, and a little below the neck of the uterus and the vaginal cul-de-sacs; there seemed to be two muscular bands at this point, one on each side, which contracting, narrowed the canal; the contraction was voluntary.

It is somewhat remarkable that in the recent study of vaginismus affecting the canal in its middle or upper portion, spasmodic elytrostenia, as it is called by Debrand, no reference is made to the facts that it was observed many years ago, and that the very comparison as to the captive human penis now made was then used. Schurigius, in 1729, wrote *De cohesione in coitu*, and referred to it as analogous to the retention of the penis noticed in animals; he quotes Lanius as stating it to be a spasmodic affection of the female genitals. Riolanus describes it as a grasping of the penis by the mouth of the womb open after menstruation, "and retaining it, as is done in dogs." Diemerbroec, in 1687, also mentioned the disease.

It is well for us to be grateful for all additions to medical knowledge, but it is also well for us not to neglect the observations of past ages, and to remember that rediscoveries are probably more frequent than discoveries.

DR. FLINT'S ADDRESS.

DR. FLINT's able address before the New York State Medical Association is a most timely contribution to questions in which both the profession and the laity have always had a deep interest. Of special importance just now are his remarks on medical therapeutics, when a tendency can be observed toward an extreme reaction from the Nihilistic doctrines. The admirable precepts of Bigelow, Forbes, and Holmes are not so potent with the rising generation of physicians; and under the seductive influence of the samples, pamphlets, and special journals of our great drug houses, there is danger of a return to the unnecessary and indiscriminate use of medicine which characterized the practice of thirty or forty years ago.

On several occasions, Dr. Flint has used his prominent position and authority to urge that "a knowledge of the natural history of diseases is the true point of departure for therapeutics," and here again he pleads for a recognition of the self-limitation of many diseases, of their intrinsic tendency to recovery, and of the position of the physician "as nature's servant, not her master." The difficulty is chiefly, as he says, with the public, who expect to be drugged, and are dissatisfied if a consultation does not result in additional medicine, or, at any rate, a change. But desired reformation will not come until greater unanimity prevails in the profession, and until the laws of natural—as opposed to applied—therapeutics are more fully understood. Gubler's aphorism, "*L'organisme se quérît lui-même*," might serve as a text for many valuable lectures.

Dr. Flint draws a very truthful picture of the pharmacomaniacal practitioner, who still is active among us, not in the old form of thirty years ago, with bulky powders and sixteen ounce mixtures, but with pleasing pellets, sweetly coated pills, bland wafers, delicious fluid extracts, and soothing tablets.

The remarks on the principles of dietetic therapeutics deal with two important problems—judicious feeding in fever and chronic ailments, and the advisability of allowing the promptings of nature to be more fully followed than is at present the case. Not every one will agree with the author when he says that it is better to overfeed than underfeed, for the dangers of the former plan are often obvious in disturbance of an already enfeebled digestion; and many will think, while acknowledging the need of reform in dietetic regulations, that he scarcely gives sufficient warning of the errors which may arise if

These photographs,
from the 'Medical
News', Phila., vol.
45,
1884, were
sent by Dr Malloch
in 1929, after the
Catalogue was
printed.

The editorial
'An uncommon
form of Vaginismus'
(pp. 602-3) attached
to this leaf & the
next, was by
Theophilus Parvin,
and drew from
E.Y.D.'s fertile
imagination and
ready pen the
letter (p. 673)
inserted below
at leaf 29.

W.W.F.

the proof is
scientific accu-
of certain
f dissemi-
l knowing
eases, and
of readily
re, and of
reatment,
consumer,
at all in-
that this
e guarded

igus—the
e rise to
is. Milk
nation of
phthæ on
kness, at
supposed
which fed

to show
foot and
it similar
clear how
poison of
ne other
did fever
pidemics
ontamin-
ilk. In
case of
non ex-
as been
aggsted
warm, as

Other
do not
hich, in
deemed
of trans-

ficer of
ilk epi-
cautions
ese out-
divided
riorities.
of boil-
is prac-
at "to
said to
it."

of the
ie strict

control of the sanitary authorities, which should be
clothed with power to make proper regulations and
to enforce them by the aid of efficient inspection.
The organization of such a service would at first be
arduous, but so soon as its requirements are made
known and intelligently comprehended, a willing co-
operation might be expected in most cases. There
is a prevailing ignorance of the facts above stated,
which is damaging to the best interests of the public
health and ought to be removed. In no way can
this be better accomplished than by the organization
of an authoritative service regulating the purveying
and sale of this important article of food.

AN UNCOMMON FORM OF VAGINISMUS.

THE word *cunnius*, signifying the female puden-
dum, was said to have been used by "the more
lascivious poets," and was condemned by Cicero, in
one of his orations, as an obscene word. Though
Horace does not deserve to be placed in this class,
yet he made use of the word: *Fuit ante Helenum
cunnius teterrima belli causa*. Nevertheless, it has a
classic derivation, probably coming from *κύνειν*—to
be pregnant—and for many years had a place in
anatomy; indeed, up to the present some writers
speak of the constrictor *cunni* muscle, but most
now designate the muscular structure which contracts
the vaginal entrance as the bulbo-cavernosi muscles;
these are the vaginal sphincter.

The late DR. SIMS, in a paper communicated to the
London Obstetrical Society by Dr. Tyler Smith in
1861, stated that, by the term *vaginismus*, he pro-
posed to designate "an involuntary, spasmodic closure
of the mouth of the vagina, attended by such excessive
supersensitiveness as to form a complete barrier to
coition." Dr. Sims did not describe a new disease—
indeed, he disclaimed any such attempt. Dr. Louis
Debrand, who has recently published an important
monograph, *Des Rétrécissements du Conduit Vulvo-
Vaginal*, states that Huguier, in 1834, was the first
to describe spasmodic contraction of the vaginal
sphincter. Nevertheless, though Dr. Sims only re-
called attention to a disorder which others had ob-
served, he gave it a name so suitable that it at once
received general acceptance, and is sure to keep its
place in medical nomenclature.

But while the name was received with such favor,
its definition as given by Dr. Sims was soon found
to be too narrow. For example, in a case of vagin-
ismus recently under our observation (the subject had
been married several months, and coition had been
impossible) there was very great suffering, especially
marked at the monthly periods, in the anal sphincter,
violent cramp of this muscle, accompanied with
painful and difficult defecation, although there was
no local disease to be discovered here, and the

BER 29, 1834.]

vea

1889, vol 45, H. 602-603

This Caughnawaga letter and
Parvin's editorial have been
reprinted by Arthur C. Jacobson,
"Perris captivus: myth or actual-
ity, with some notes on Sir W.
D.'s alter ego," in Medical
Times, N.Y., 73: 52-4, (Feb.)
1945.

No. 7641, leaf 29.

'Vaginismus'

See note on verso of leaf 27. →

W.O. sent this E.Y.D. letter to Montreal
to amuse his friends. Dr. Wm. Mol-
son, seeing his chance to be avenged
for the 'Professional Notes' (leaf 9
above) and other tricks O. had
played on him, forwarded the
letter to the Phila. 'Med. News' with
his imprimatur as 'Editor of the
C.M. & S. Journal' (Information given
by Molson, with great glee, to Dr C.P.
Howard and confirmed, with blushes,
by W.O.)

W.W.F.

Oct. 1930.

may impinge on the trachea, causing ulceration and death.

DR. S. W. GROSS said that Dr. Roberts's point had not yet been answered. He wanted to find out whether stenosis results from excision of a portion of the trachea. This tube is made more or less rigid by its cartilaginous rings, and he should like some one to explain how stenosis can occur.

DR. LEVIS said that by the ordinary process of cicatricial contraction.

DR. S. W. GROSS did not believe that the excision of a portion of the trachea in these cases is ever followed by contraction. He knows of no reason why new cartilage should not be formed. He would suggest that this matter be made a subject of experimental study by Dr. Roberts.

DR. W. H. PANCOAST said, in regard to his father's experience in later years, that after making the incision he removed a little piece of the trachea. He also used a lead wire to hold the soft tissues apart.

DR. ROBERTS was inclined to think with Dr. Gross that the term stenosis, as applied to the trachea, is a fallacy. Such a limited excision of the cartilaginous and fibrous tissues should not produce stenosis. The cases of supposed stenosis may have been cases in which there was interference with rhythmical up-and-down movements of the trachea.

DR. MEARS said that if any portion of the tracheal wall was cut out, he thought that the tissue formed in repair would produce a band extending straight across. This would certainly reduce the calibre of the tube.

DR. W. W. KEEN called attention to the fact that no one makes an opening large enough for the free movement of the tube. If no tissue is removed, and the tube is left in for any length of time, necrosis of the cartilage occurs, and nature does what the surgeon does in the other case. If there should be any truth in this point about stenosis as the result of contraction, it seemed to him that it should occur in every case in which the tube has been left for any length of time.

CORRESPONDENCE.

VAGINISMUS.

THROUGH the courtesy of the Editor of *The Canada Medical and Surgical Journal*, we are in receipt of the following note:

29th DEAR SIR: The reading of an admirably written and instructive editorial in the Philadelphia MEDICAL NEWS for 24th November, on forms of vaginismus, has reminded me of a case in point which bears out, in an extraordinary way, the statements therein contained. When in practice at Pentonville, Eng., I was sent for, about 11 P. M., by a gentleman whom, on my arriving at his house, I found in a state of great perturbation, and the story he told me was briefly as follows:

At bedtime, when going to the back kitchen to see if the house was shut up, a noise in the coachman's room attracted his attention, and, going in, he discovered to his horror that the man was in bed with one of the maids. She screamed, he struggled, and they rolled out of bed together and made frantic efforts to get apart, but without success. He was a big,

burly man, over six feet, and she was a small woman, weighing not more than ninety pounds. She was moaning and screaming, and seemed in great agony, so that, after several fruitless attempts to get them apart, he sent for me. When I arrived I found the man standing up and supporting the woman in his arms, and it was quite evident that his penis was tightly locked in her vagina, and any attempt to dislodge it was accompanied by much pain on the part of both. It was, indeed, a case "De cohesione in coitu." I applied water, and then ice, but ineffectually, and at last sent for chloroform, a few whiffs of which sent the woman to sleep, relaxed the spasm, and relieved the captive penis, which was swollen, livid, and in a state of semi-erection, which did not go down for several hours, and for days the organ was extremely sore. The woman recovered rapidly, and seemed none the worse.

I am sorry that I did not examine if the sphincter ani was contracted, but I did not think of it. In this case there must have been also spasm of the muscle at the orifice, as well as higher up, for the penis seemed nipped low down, and this contraction, I think, kept the blood retained and the organ erect. As an instance of Jago's "beast with two backs," the picture was perfect. I have often wondered how it was, considering with what agility the man can, under certain circumstances, jump up, that Phineas, the son of Eleazar, was able to thrust his javelin through the man and the Midianitish woman (*vide Exodus*); but the occurrence of such cases as the above may offer a possible explanation.

Yours truly,

EGERTON Y. DAVIS,
Ex. U. S. Army.

CAUGHNAWAGA, QUEBEC, 4th December, 1884.

NEWS ITEMS.

VIENNA.

(From our Special Correspondent.)

THE BACILLUS OF SYPHILIS.—Dr. Lustgarten, a young Viennese physician, who spent some months in Prof. Weigert's laboratory in Leipzig, and to whom a place as assistant in Prof. Kaposi's Clinic for skin diseases in the Vienna Hospital is reserved, will communicate to the Vienna Society of Physicians, at its next meeting, the results of his investigations in Leipzig. As those results will certainly attract much attention and interest wherever they become known, it is a happy accident that private communication makes it possible to lay in advance before the readers of THE MEDICAL NEWS a short abstract of Dr. Lustgarten's discovery.

It must be said, however, that Dr. Lustgarten is not to be considered as one of Prof. Weigert's pupils, but that he is only indebted to him for the facilities of his laboratory.

Dr. Lustgarten has found a new bacillus which he considers as characteristic of syphilis, since this bacillus has been found nowhere else but in syphilitic tissues, namely, in a gumma and in several cases of scleroma syphiliticum. The tumors showed, on thin sections, when treated in a specific way with certain coloring matters, bacilli, which, though in shape and size resembling tubercle-bacilli, could easily be diagnosed as quite different from them by the reaction toward various staining fluids. Dr. Koch recognized the dif-

Numbr. 25.
6-18.

This Caughnawaga letter
Parvin's editorial have been
reprinted by Arthur C.
"Parvin's captious; myth
ity, with some notes of
D.'s alter ego," in
Times, N.Y., 73: 52
1945.

No. 7641, leg

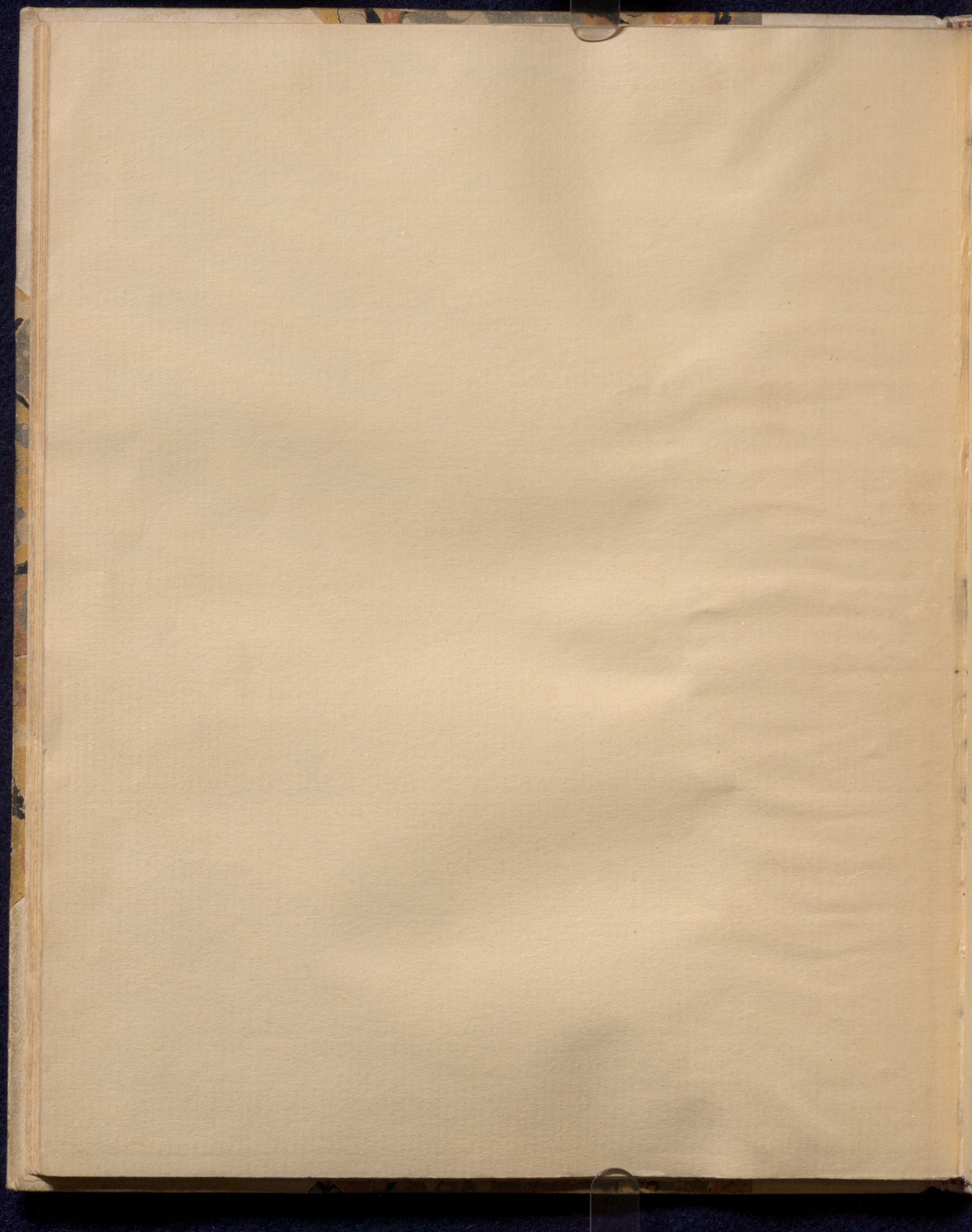
'Vaginism

See note on verso
W.O. sent this E.Y.
to amuse his friend
son, seeing his ch
for the 'Professi
above) and other
played on him
letter to the Phi
his imprimatur
C.M. & S. Journ
by Molson, with
Howard and
(by W.O.)

DECEMBER 13, 1894

Wed

1884. vol 45. f. 673



"PEYRONIE'S DISEASE — STRABISME DU
PÉNIS."

PEYRONIE'S DISEASE — STRABISME DU PÉNIS.

PITTSBURG, Feb. 14, 1903.

MR. EDITOR, — An old codger of about 65 years came in one day, and, casting a furtive glance about the room, shut the door with great deliberation. To my question, "What is the matter?" he replied, "Squint of the cock." As I did not take genito-urinary cases, I advised him to consult my friend Dr. Ricord, upon which he handed me a letter, saying that his doctor had told him that I would be most interested in his case. He then told his story. A widower for some years, he was anxious to marry again, but was afraid to do so on account of a most remarkable change in his yard. When erect it curved to one side in such a way as to form a semicircle, hopeless and useless for any practical purposes. I call it, he said, "*squint of the cock*." Examination showed at one side of the root of the penis a firm induration about the size of a cherry, so placed as to completely fill a part of one corpus cavernosum. Of course, on erection blood filled the other corpus only, and in consequence the penis curved towards the affected side, producing the *squint* of which he spoke. In the works at my disposal, including one well-known manual of genito-urinary surgery, I could find no account of this singular affection, but having learned when in doubt to consult Jonathan Hutchinson's "Archives of Surgery," I there found a very full account of these fibrous plaques in the corpora cavernosa, which if unilateral produce all sorts of distortions of the penis, if bilateral, impotence. Turning to another storehouse, the *Dictionnaire Encyclopédique*, under the article *Pénis*, I there found a very good description, but in addition, what was most interesting, the statement that in about 1765, Peyronie, a French surgeon, had described the disease as *Strabisme du pénis*, the very term used by my old patient. There are very good illustrations of the conditions in Taylor's Manual, but in these eponymic days old Peyronie should have the credit of describing in a happy phrase a very unfortunate defect.

J. W. W., JR.

April 24, 1903.
Pittsburg, Pa.,
over the Scotch
ished members
become guilty
dition for his
45). The ear-
(I have heard
Codger," (III)
see a visit to
etc.), (V) Dic-
Pittsburg). Is
ood from Pitts-

ever think of
acter on Valen-
soul.
lives in Balti-

salt water"

E. T. D., JR.

's)

n offprint
eb., 1903,
sler who
s surgical
notes are
the Library

4 is from
signed by
s initials,

s" he
and-cheese
l clerks.

La P 15 Jan 1878 - 25 Apr 1897
and married former Acad
R Chin in 1731

B + T

Aug 1778

Laprymies fault Hind - Broy mit. Drg.
mem. sur q. obtac. qui s'offrent - Simon, mem. R d'lec.
my R Chin. t. 1.

Dict. vireye - 607 les inflexions chir. plant
dans ces body.

1743 post mortem obj. sans study. Mem.

Acad. roy. de Chir. 1743 avec La Peyronie
sur quelques obliterations qui s'opposent à l'éjacu-
lation. R. la semence - vient être, tr. qui vint.

610. Dfct. in sicc. & yac. : Acc. & curus.

Tuf. brouillard par Ricord sans expressions
pittoresques. Dans le cas, dit-il où

la presque totalité de l'épaisseur
des corps cav. est atteinte, la partie
ant. de la verge (yard

ne se gonfle plus pendant l'érection,
elle forme fleau. Si l'induration est
lim. à l'une des cotés de la verge,
le p. se voit latéralement, il couche
c'est un vint. strabisme penien

Archives of Surg. vol 5, 329 + VI, 180
case with Dupuytren in man of 60

11, 118 another - recas. from "Shi"
but Duf. etc. - gout in form

La Peyronie. Mem. de l'Acad. Roy
de Chir. 1743 p 425
next art by same sub. by Petit

"PEYRONIE'S DISEASE—STRABISME DU
PENIS."

PHILADELPHIA, April 24, 1903.

MR. EDITOR: I fear J. W. W., Jr., of Pittsburg, Pa., has been listening to many valuable "over the Scotch and soda" clinics of one of the distinguished members of our profession, and has unconsciously become guilty of plagiarism, palming off another's erudition for his own (see JOURNAL, Feb. 26, 1903, p. 245). The earmarks of plagiarism are: (I) the title (I have heard "S and S" lectures with such title), (II) "Codger," (III) "Yard," (IV) Hutchinson's Archives (see a visit to the Hutchinson's County Home by etc., etc.), (V) Dictionnaire Encyclopedique (none such in Pittsburg). Is it possible, like everything else that is good from Pittsburg, it is a "steal"?

Moreover, no one in Pittsburg would ever think of writing a sentimental letter of such character on Valentine's Day. There is too much iron in his soul.

Finally, I find by Polk's that Dr. Ricord lives in Baltimore.

Regretting this further "gold from salt water" attempt to "take in" the Yankees,

I am,

E. T. D., JR.

Peyronie's (sic for Lapeyronie's)
disease:-

The letter dated Feb. 14 is an offprint from Boston Med. & Surg. J., 26 Feb., 1903, 148, p. 245, and was written by Osler who signed it with the initials of his surgical friend, J. Wm. White. The pencil notes are by Dr. Geo. Dock, who sent it to the Library in 1932.

The photo'd letter of April 24 is from the same Journal, p. 485, and was signed by White with Egerton Yorrick Davis's initials, here misprinted E.T.D.

By the "Scotch and soda clinics" he probably means W.O.'s famous beer-and-cheese Saturday evenings with his clinical clerks.

W.W.F.

*A card record of Sortu & Peyronie's penises
in # 7667, "1901" envelope.*

Dict. encyc. - 667 les inflexions du langage
 dans ces body.
 1743 part. math. obj. sans étude. Mém.
 Acad. roy. de Chir. 1743 avec La Peyronie
 sur quelques observations qui s'opposent à l'opé-
 ration de la semence - surt. éph. tr. qu. n. n.
 610. Dfct. in grec & lat. ; Rec. & cur.
 Jup. Linné par Ricard sous expressions
 pittoresques. Dans la cas, dit-il n'est
 la presque totalité à 1161.

Peyronie's (also for La Peyronie's)
 disease:-

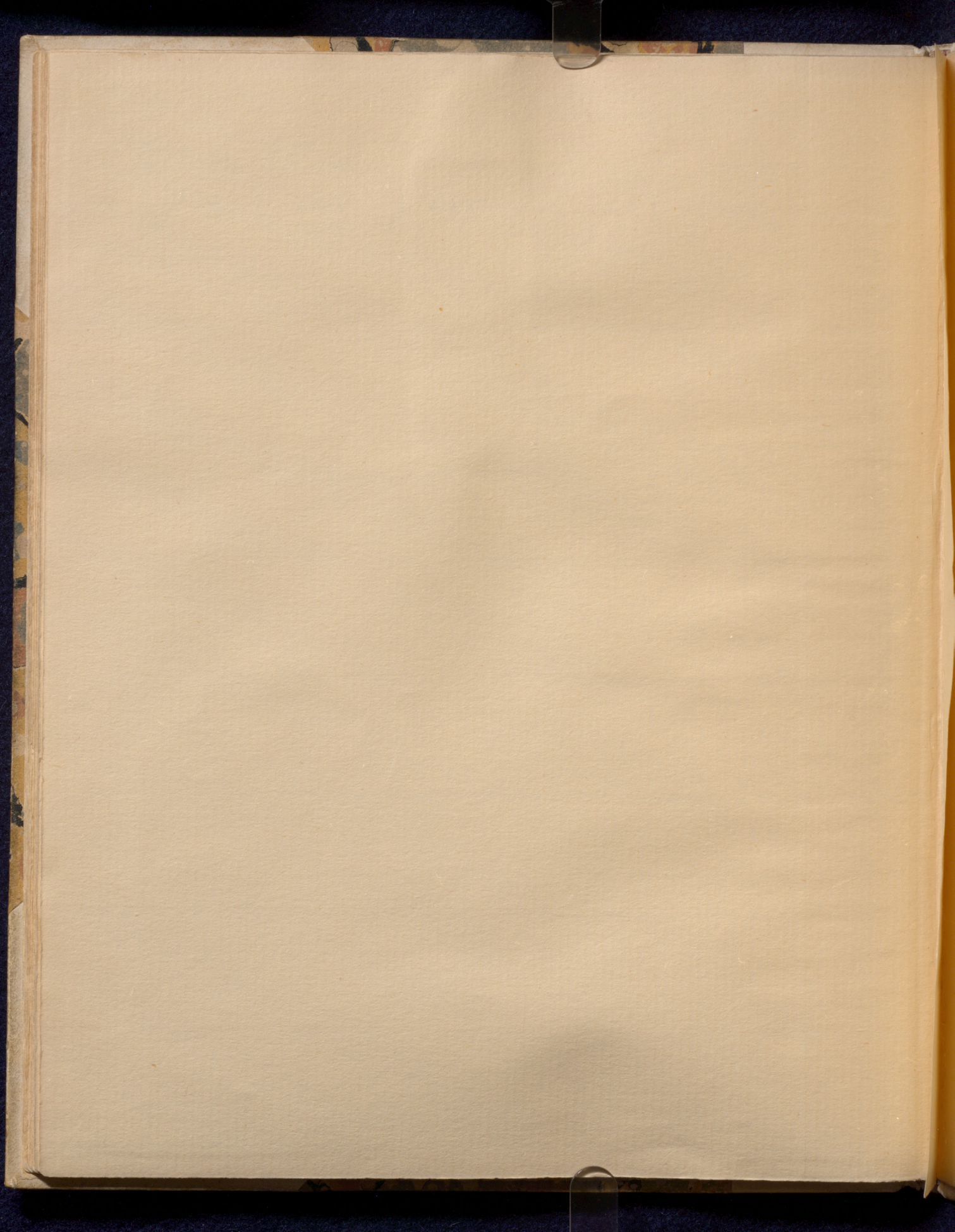
The letter dated Feb. 14 is an offprint
 from Boston Med. & Surg. J., 28 Feb., 1903,
 148, p. 245, and was written by G. L. Davis who
 signed it with the initials of his surgical
 friend, J. W. White. The pencil notes are
 by Dr. Geo. Dock, who sent it to the library
 in 1932.

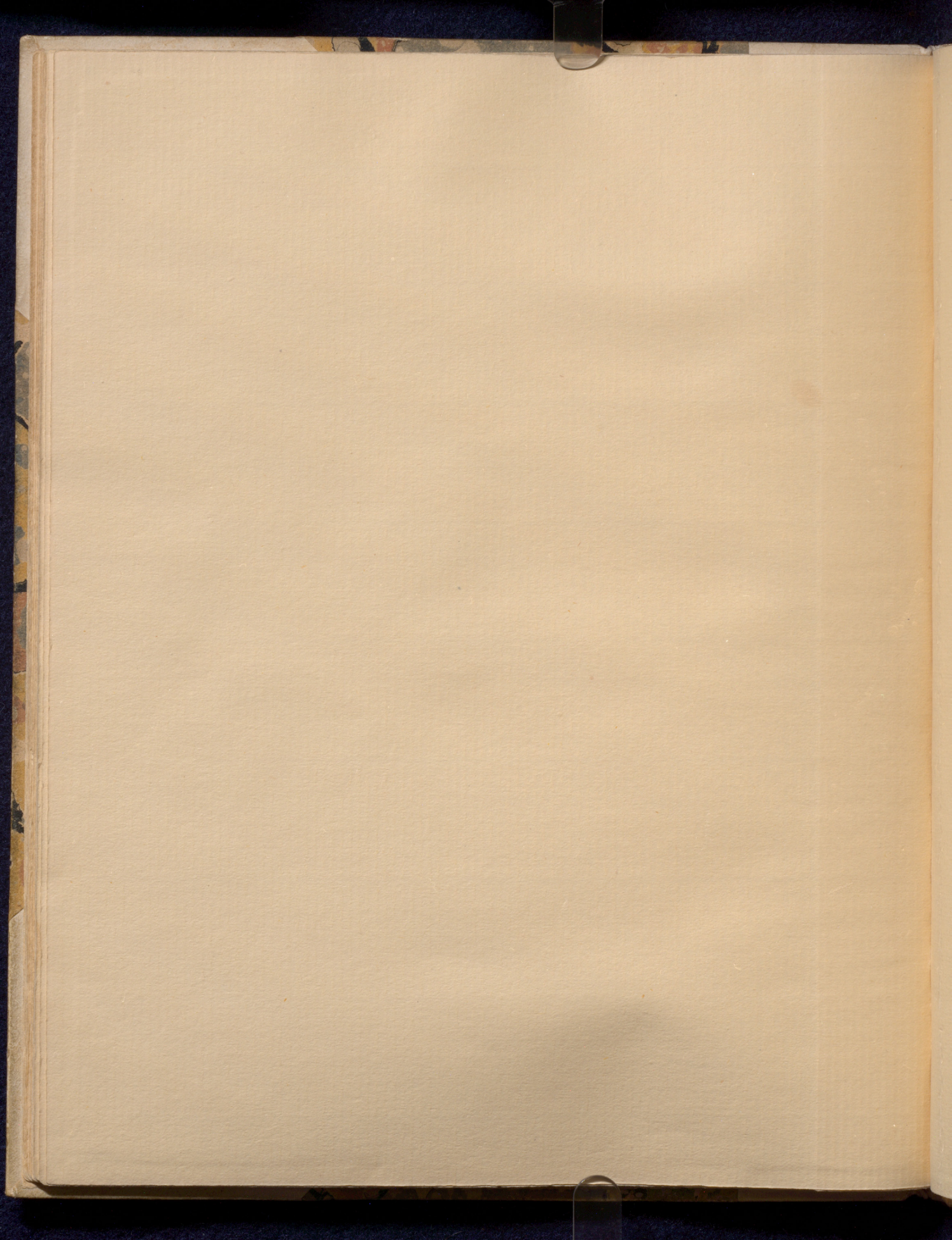
The photo'd letter of April 24 is from
 the same Journal, p. 485, and was signed by
 White with Pearson Yorrick Davis's initials,
 here designated E.T.D.

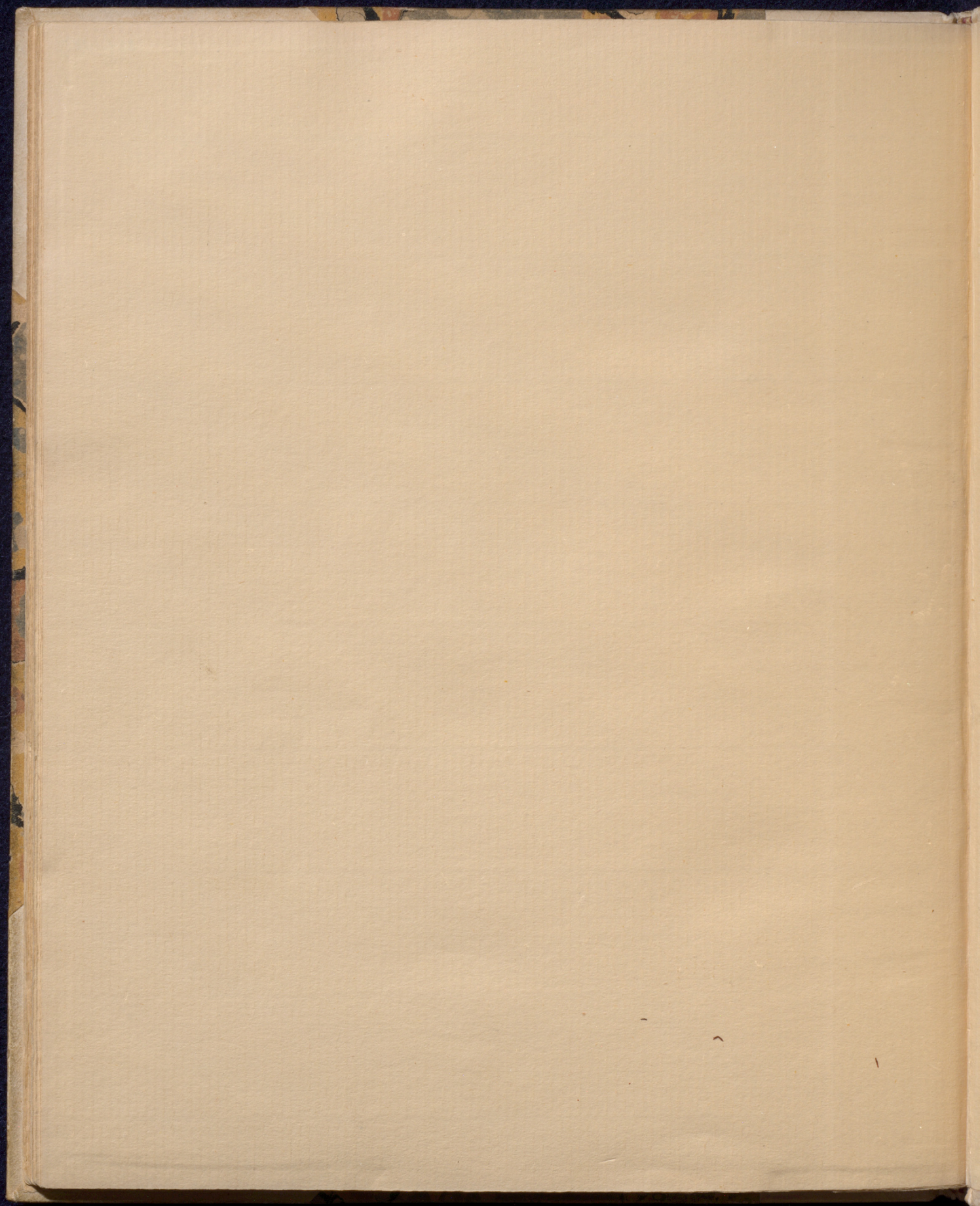
By the "Sooty and soda ointment" he
 probably means W.O.'s famous pear-and-cheese
 Saturday evening with his clinical clerk.

W.F.F.

Port. In. & S. J.
~~26~~ 1903, 148







Oster
Niche 3
B.O. 7641
#252331376

